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UTILITY **PATENT APPLICATION** TRANSMITTAL

Attorney Docket No. First Inventor

(Only for new nonprovision	onal applications under 37 CFR 1.53(b))	Express Mail Label No.			
	ATION ELEMENTS	ADDRESS TO: Assistant Commissioner for Patents Box Patent Application			
	ceming utility patent application contents.	Washington, DC 20231			
	Form (e.g., PTO/SB/17) a duplicate for fee processing)	CD-ROM or CD-R in duplicate, large table or			
	small entity status.	Computer Program (Appendix)			
2. See 37 CFR 1.27		Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)			
3. Specification (preferred arrangement)	[Total Pages 9]]	a. Computer Readable Form (CRF)			
	e of the invention	b. Specification Sequence Listing on:			
	ce to Related Applications garding Fed sponsored R & D	i CD-ROM or CD-R (2 copies); or			
	equence listing, a table,	ii. 🔲 paper			
or a computer - Background of	program listing appendix f the Invention	c. Statements verifying identity of above copies			
- Brief Summary	y of the Invention				
- Brief Description - Detailed Description	on of the Drawings (if filed)	ACCOMPANYING APPLICATION PARTS			
- Claim(s)	npaon	9. X Assignment Papers (cover sheet & document(s))			
- Abstract of the	Disclosure	10. 37 CFR 3.73(b) Statement (when there is an assignee) Attorney			
4. Drawing(s) (35 t	U.S.C. 113) [Total Sheets 2]	11. English Translation Document (if applicable)			
5. Oath or Declaration	[Total Pages]	12. Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS Citations			
	cuted (original or copy)	13. Preliminary Amendment			
b. Copy from a for continua	a prior application (37 CFR 1.63 (d)) ation/divisional with Box 18 completed)	Return Receipt Postcard (MPEP 503) (Should be specifically itemized)			
	TION OF INVENTOR(S)	15. Certified Copy of Priority Document(s) (if foreign priority is claimed)			
	atement attached deleting inventor(s) the prior application, see 37 CFR	16. Request and Certification under 35 U.S.C. 122			
1.63(d)(2)) and 1.33(b).	(b)(2)(B)(i). Applicant must attach form PTO/SB/35			
6. Application Data	a Sheet. See 37 CFR 1.76	or its equivalent.			
or in an Application Data Sh		ply the requisite information below and in a preliminary amendment,			
Continuation	Divisional Continuation-in-part (CIP)	of programment on Ale			
Prior application information:	Examiner	of prior application No/			
• •		Group Art Unit:e prior application, from which an oath or declaration is supplied under			
Box 5b, is considered a part of	of the disclosure of the accompanying continu	action or divisional application and is hereby incorporated by reference. tently omitted from the submitted application parts.			
	19. CORRESPONDE				
Customer Number or Bar C	orde Labol	or Correspondence address below			
	(Insert Customer No. or Attach ba	r code (abet here)			
Name	Kathleen KB	owen			
	311 Hillbrook	Dr			
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City	Campboon Falls	State 7 H Zip Code 44223			
	Cuyahoga talls				
Country	USA Tele	ephone 330945 693 Fax 330945693			
Name (Print/Type)	Kathlean K Bowen	Registration No. (Attorney/Agent) 42352			
Signature	KAHO KBOWEN	Date 1/29/2001			

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FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT

(s) 750,00

Complete if Known					
Application Number					
Filing Date	Tan vary 29,2001				
First Named Inventor	Young, timothy Ji				
Examiner Name	, 0,				
Group Art Unit					
Attorney Docket No.	10030				

METHOD OF PAYMENT	FEE CALCULATION (continued)					
1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:	3. ADDITIONAL FEES					
indicated fees and credit any overpayments to:	Large Small					
Account 50136	Entity Entity Fee Fee Fee Fee Fee F	Description Fee Paid				
Number 3010	Code (\$) Code (\$)	Description Fee Paid				
Deposit Account	105 130 205 65 Surcharge - late f	iling fee or oath				
Name L	127 50 227 25 Surcharge - late p cover sheet	provisional filing fee or				
Applicant claims small entity status.	139 130 139 130 Non-English spec	ification				
See 37 CFR 1.27	147 2,520 147 2,520 For filing a reque	st for ex parte reexamination				
2. Payment Enclosed: Chack Credit eard Money Only	112 920* 112 920* Requesting public Examiner action	cation of SIR prior to				
Check Credit card Money Other FEE CALCULATION		cation of SIR after				
	115 110 215 55 Extension for rep	oly within first month				
BASIC FILING FEE Large Entity Small Entity	116 390 216 195 Extension for rep	ly within second month				
Fee Fee Fee Fee Description	117 890 217 445 Extension for rep	ly within third month				
Code (\$) Code (\$) Fee Paid	118 1,390 218 695 Extension for rep	ly within fourth month				
101 710 201 355 Utility filing fee	128 1,890 228 945 Extension for rep	ly within fifth month				
106 320 206 160 Design filing fee	119 310 219 155 Notice of Appeal					
107 490 207 245 Plant filing fee 108 710 208 355 Reissue filing fee		upport of an appeal				
114 150 214 75 Provisional filing fee	121 270 221 135 Request for oral it	nearing				
•	138 1,510 138 1,510 Petition to institut	e a public use proceeding				
SUBTOTAL (1) (\$) 710,00	140 110 240 55 Petition to revive	- unavoidable				
2. EXTRA CLAIM FEES	141 1,240 241 620 Petition to revive	- unintentional				
Fee from Extra Claims <u>below</u> Fee Paid	142 1,240 242 620 Utility issue fee (c	or reissue)				
Total Claims 20 -20** =	143 440 243 220 Design issue fee					
Independent Claims - 3** = - X = =	144 600 244 300 Plant issue fee					
Multiple Dependent =	122 130 122 130 Petitions to the C	ommissioner				
	123 50 123 50 Processing fee up	nder 37 CFR 1.17(q)				
Large Entity Small Entity Fee Fee Fee Fee Fee Description	126 180 126 180 Submission of Inf	formation Disclosure Stmt				
Code (\$) Code (\$) 103 18 203 9 Claims in excess of 20		patent assignment per umber of properties)				
102 80 202 40 Independent claims in excess of 3	146 710 246 355 Filing a submission	on after final rejection				
104 270 204 135 Multiple dependent claim, if not paid	(37 CFR § 1.129					
109 80 209 40 ** Reissue independent claims over original patent	149 710 249 355 For each addition examined (37 CI	nal invention to be FR § 1.129(b))				
110 18 210 9 ** Reissue claims in excess of 20	179 710 279 355 Request for Cont	inued Examination (RCE)				
and over original patent	169 900 169 900 Request for expe of a design appli	edited examination location				
SUBTOTAL (2) (\$) - 0 -	Other fee (specify)					
**or number previously paid, if greater; For Reissues, see above	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 40.00					

SUBMITTED BY	Complete (# applicable)				
Name (Pnnt/Type)	Kathlean K Boi	NEN Registration No. (Attorney/Agent)	42352	Telephone	339-945-6931
Signature	KathKowen		•	Date	1/29/2001

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